SECTION IV

510(k) SUMMARY OF SAFETY AND EFFECTIVENESS INFORMATION

as required by the Safe Medical Devices Act of 1990 and codified in 21 CFR 807.92 upon which the substantial equivalence is based.

Smith & Nephew KINSA RC Suture Anchor

MAY 16 2007

Date Prepared: May 14, 2007

A. Submitter's Name:

Smith & Nephew, Inc., Endoscopy Division 150 Minuteman Road Andover MA, 01810

B. Company Contact

Deana Boushell

Regulatory Affairs Specialist

Phone:

(508) 337-4036

FAX:

(508) 261-3620

C. Device Name

Trade Name:

KINSA RC Suture Anchor

Common Name:

Fastener, fixation, non-degradable, soft tissue

Classification Name: Fastener, fixation, non-degradable, soft tissue

D. Predicate Devices

The Smith & Nephew KINSA RC Anchor is substantially equivalent in Intended Use and Fundamental Scientific Technology to the following legally marketed device in commercial distribution: The Smith & Nephew KINSA Suture Anchor (K061154).

E. Description of Device

The KINSA RC Anchor is a suture anchor manufactured from PEEK polymer. The design incorporates a suture knot within the anchor body and a suture loop with a tension suture extending from the top of the anchor. This design allows the surgeon to implant the anchor, pass the suture loop through the tissue and using the tensioning suture, complete the repair without the need for knot tying.

F. Intended Use

The Smith & Nephew KINSA RC Suture Anchor is intended for use for the reattachment of soft tissue to bone for the following indications:

Deltoid Repairs Rotator Cuff Tear repairs Biceps tenodesis

G. Comparison of Technological Characteristics

The Smith & Nephew KINSA RC Suture Anchor is substantially equivalent in design, materials, function and intended use to the Smith & Nephew KINSA suture anchor, cleared in K061154. The proposed and the predicate devices both have the same intended use, indications for use, anchor material, suture material, knotless design.

H. Summary Performance Data

The performance testing conducted demonstrates substantial equivalence to the Smith & Nephew KINSA Suture Anchor, cleared in K061154. The testing also demonstrates that the differences in the new device and the predicate device do not raise any new issues of safety and efficacy.





Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Smith & Nephew, Inc.
% Ms. Deana Boushell
Regulatory Affairs Specialist
Endoscopy Division
150 Minuteman Road
Andover, Massachusetts 01810

MAY 16 2007

Re:

K070908

Trade/Device Name: KINSA RC Suture Anchor

Regulation Number: 21 CFR 888.3040

Regulation Name: Smooth or threaded metallic bone fixation fastener

Regulatory Class: Class II Product Code: MBI Dated: March 29, 2007

Received: April 2, 2007

Dear Ms. Boushell:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21

CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050. This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (240) 276-0120. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (240) 276-3150 or at its Internet address http://www.fda.gov/cdrh/industry/support/index.html.

Sincerely yours,

Mark N. Melkerson

Director

Division of General, Restorative and Neurological Devices Office of Device Evaluation Center for Devices and Radiological Health

Enclosure

Indications for Use

| 510(k) Number | (if known): | K070908 | | |
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| Indications For | | | | |
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| Deltoid Rep Rotator Cuf Biceps teno | f Tear repairs | | | |
| Prescription Us | sex | AND/OR | Over-The-Counter Use | |
| (Per 21 CFR 801 Subpart D) | | (21 C | (21 CFR 807 Subpart C) | |
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